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LAUNCESTON RURAL DISTRICT COUNCIL

ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

for the year

1957

Health Area Office,  
LAUNCESTON.  
Cornwall.

WILLIAM PATERSON, M.B., Ch.B., D.P.H.  
Medical Officer of Health

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LAUNCESTON RURAL DISTRICT COUNCIL

Members of the Public Health and Housing Committee:

E.C. CHUDLEIGH, Chairman

G.T. BURNARD

F. BROAD

J. CLIMO

E. COWLING

W. DENNIS

A.L. STEPHENS

W.H. VELLE

Miss J.K. BRADDON

T.W. STROUT

W.B. KENT

Mrs R. KNEEBONE

M.R. PENNEY

W.R. SANDERCOCK

Rev. W.L. ACKROYD

K.J. UGLOW

J.N. STEPHENS

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Public Health Officers of the Local Authority

MEDICAL OFFICER OF HEALTH

W. PATERSON, M.B., CH.B., D.P.H.

Also holds appointments of:

Medical Officer of Health: Launceston Borough Council  
Bude/Stratton Urban District Council  
Stratton Rural District Council  
Camelford Rural District Council

Assistant County Medical Officer, Area No. 6 Cornwall County Council

School Medical Officer - Cornwall County Council

PUBLIC HEALTH INSPECTOR:

T.A. JULD, M.P.H.I.A.

# SUMMARY OF VITAL STATISTICS:

Area (in acres)	73,187
Population	6,420
No. of separate dwellings occupied	2,208
Rateable value 1957	£30,481
Product of 1d rate	£127.19.10.082

<u>Live Births</u>	<u>TOTAL</u>	<u>Male</u>	<u>Female</u>	<u>Rate per 1,000 estimated population:</u>
Legitimate	89	47	42	14.17
Illegitimate	2	1	1	
<u>Stillbirths</u>	2	-	2	.31
<u>Deaths</u> (all causes)	66	29	37	10.28

## Deaths from Puerperal Causes:

Puerperal & post abortive	}	N I L
Sepsis		
Other Puerperal Causes		

Infant Mortality (Deaths under 1 year per 1,000 live births)

	1 Male	Rate: 10.99	
	<u>Male</u>	<u>Female</u>	<u>Total</u>
<u>Deaths from Cancer</u> (all ages)	8	8	16
Measles (all ages)		N I L	
Whooping Cough (all ages)		N I L	
Diarrhoea (under 2)		N I L	

Health Area Office,  
LAUNCESTON.

To: The Chairman and Councillors of  
the Launceston Rural District.

Mr Chairman, Ladies and Gentlemen:

I have the honour to present the Annual Report of the Medical Officer of Health for the year 1957.

There were fewer deaths and fewer births than for the previous year. Heart disease was the commonest cause of death, followed by cancer and vascular lesions of the nervous system, in that order. One infant death and two stillbirths were recorded.

The incidence of notifiable infectious disease was low. Once again, no case of diphtheria occurred. The Rural District was involved in the epidemic of influenza towards the end of the year, but there were no deaths from the disease.

In the sanitary circumstances of the District, further progress with the provision of water supplies and sewerage is recorded, with the beginning of work on the Central Area Water Scheme and the Altarnun and Five Lanes Sewerage Scheme.

The unsatisfactory situation with regard to meat inspection continued. In the circumstances which obtain in this scattered rural district, the achievement of adequate meat inspection by a single-handed public health inspector is a physical impossibility.

I wish to record my thanks to Mr T.A. Judd, the Council's Public Health Inspector for his valuable assistance in all aspects of our work together and in the preparation of this report. The Council's other departments have continued their willing help. I am grateful to the General Medical Practitioners for their co-operation.

The interest of the Council and, in particular, of the Chairman and members of the Public Health Committee is once more gratefully acknowledged.

I have the honour to be,

Your obedient servant,

WILLIAM PATERSON

Medical Officer of Health



NATURAL AND SOCIAL CONDITIONS

Area (in acres) 73,187. The district is essentially agricultural, the only industry not connected with agriculture being the New Consols tin and wolfram mine at Lockett and another smaller mineral working in Altarnun Parish.

Population - The Registrar General has estimated the population for the mid-year 1957 to be 6,420, a decrease of 20 in the population for the previous year. The "natural increase" in the population is the excess of births over deaths. In 1957 there were 25 more births than deaths.

It is important that too much weight should not be attached to small variations in these rates from one year to the other, particularly where relatively small populations are involved - attention should rather be paid to the trend of these rates over a period of years.

Deaths - The total number of deaths assigned to the district for the year was 66 compared with 69 in 1956. The crude death rate based on the mid-year population was 10.28 compared with 10.71 in the previous year. The following table has been compiled for comparison with previous years:

<u>Year</u>	<u>Total</u>	<u>Male</u>	<u>Female</u>	<u>Recorded Rate</u>
1953	76	43	33	11.70
1954	54	30	24	8.33
1955	79	46	33	12.24
1956	69	35	34	10.71
1957	66	29	37	10.28

In order to compare the mortality in the district with the mortality for England and Wales, it is necessary to make a correction to allow for the difference in age and sex distribution of the two populations. This is done by applying to the crude death rate of the District an "Area Comparability Factor" which has been estimated by the Registrar General as .87 for the District.

The Standardised Death Rate, therefore, is 8.943 which may be compared with that of 11.5 for England and Wales.

Births - The number of live births assigned to this District was 91 compared with 95 in 1956. The rate per thousand of the population was 14.17. When the Registrar General's area Comparability Factor for births 1.12 is applied to this figure, the Standardised Birth Rate of 15.87 for this District compares with 16.1 for England and Wales.

Stillbirths - The number of stillbirths during 1957 was 2.

Illegitimate Births - There were 2 illegitimate births assigned to the District during the year. Shown as a proportion of the total number of live births, this represents 2.19 per cent.

Infant Mortality - The number of infants who died before reaching their first birthday was 1 giving an Infant Mortality Rate of 10.99. This figure compares with 23.0 for England and Wales per thousand related live births.

The cause of death in this case, which occurred at the age of 2 months, was Toxaemia due to broncho-pneumonia.

### MORTALITY TABLE

Classified in accordance with 36 headings based on the Abbreviated List of the International Statistical Classifications of Disease, Injuries and Causes of Death 1948

<u>Cause of Death</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
1. Tuberculosis, respiratory	-	-	-
2. Tuberculosis, other	-	-	-
3. Syphilitic disease	1	-	1
4. Diphtheria	-	-	-
5. Whooping Cough	-	-	-
6. Meningococcal infections	-	-	-
7. Acute Poliomyelitis	-	-	-
8. Measles	-	-	-
9. Other infective and parasitic diseases	-	-	-
10. Malignant neoplasm, stomach	1	-	1
11. Malignant neoplasm, lung, bronchus	1	-	1
12. Malignant neoplasm, breast	-	3	3
13. Malignant neoplasm, uterus	-	1	1
14. Other malignant and lymphatic neoplasms	6	4	10
15. Leukaemia, aleukaemia	-	-	-
16. Diabetes	-	-	-
17. Vascular lesions of nervous system	2	7	9
18. Coronary disease, angina	1	4	5
19. Hypertension with heart disease	3	1	4
20. Other heart disease	3	10	13
21. Other circulatory diseases	1	1	2
22. Influenza	-	-	-
23. Pneumonia	2	-	2
24. Bronchitis	1	-	1
25. Other diseases of respiratory system	-	-	-
26. Ulcer of stomach and duodenum	-	-	-
27. Gastritis, enteritis and diarrhoea	-	-	-
28. Nephritis and nephrosis	-	-	-
29. Hyperplasia of prostate	-	-	-
30. Pregnancy, childbirth, abortion	-	-	-
31. Congenital malformations	-	-	-
32. Other defined and ill-defined diseases	5	6	11
33. Motor vehicle accidents	-	-	-
34. All other accidents	1	-	1
35. Suicide	1	-	1
36. Homicide and operations of war	-	-	-
	29	37	66

## GENERAL PROVISION OF HEALTH SERVICES

### General Medical Services

General medical services under Part IV of the National Health Service Act, 1946, are provided by medical practitioners resident in the district and in adjoining districts, all of whom undertake maternity medical services.

### County Council Services

- I Health Department. The County Council is the local health authority for the purposes of Part III of the National Health Service Act, 1946 and provides the following services in the district:-
- (a) Midwifery and Home Nursing. Nurse-midwives are provided to attend general nursing and midwifery cases in the home.
  - (b) Health Visiting. The nurse midwives act also as health visitors and, with special training in the care of the mother and young child, are available to give advice on health matters in the home or at the clinic. They act also as school nurses.
  - (c) Infant Welfare Centre. A fortnightly Infant Welfare Clinic is held at the Health Clinic, Launceston.
  - (d) Dental Clinic. Priority dental treatment for expectant and nursing mothers and pre-school children is available at the Dental Clinic at the Health Clinic, Launceston.
  - (e) Vaccination and Immunisation. Facilities for vaccination against smallpox and immunisation against diphtheria and whooping cough are provided at the Infant Welfare Clinic or by the supply of materials to the family doctor.
  - (f) Home Help Service. Home helps are employed to provide domestic help for households in certain circumstances, a charge being made for this service according to the means of the person concerned.
  - (g) Ambulance Service. A service of ambulances for the conveyance of sick, accident and emergency cases is provided. For sitting cases, utilicon sitting case vehicles are used. When appropriate, some such cases are carried by the Hospital Car Service, a voluntary organisation. Day-to-day administration of the service is carried out from the Health Area Office, Launceston.
  - (h) Prevention of Illness, Care and After-Care. A full-time tuberculosis health visitor is provided for the care and after-care of tuberculosis persons. District nurses are



available to assist in the treatment of such persons when required by the Chest Physician or family doctor. Certain special investigations are carried out in other types of illness by district health visitors, while health education is carried out by the County's Medical and Nursing staff.

- (g) Mental Health. The County Council has certain responsibilities in connection with the ascertainment of mental ill-health and mental deficiency, with the provision of statutory supervision, etc. for mental defectives living in the community, and with the provision of after-care following treatment for mental illness. The Duty Authorised Officer for the district works from the Health Area Office, Launceston.

II Education Department. As local education authority, the County Council is responsible for the School Health Service, which provides the following:-

Periodic Medical Inspection of pupils  
Cleanliness Surveys of pupils  
Dental Inspection and treatment of pupils  
Ascertainment of handicapped pupils in need of special education.

Treatment Clinics, Health Clinic Launceston:-

Dental Clinic by appointment, except  
Wednesday or Thursday  
Speech Therapy each Friday afternoon.

Child Guidance, by arrangement at Plymouth Child Guidance Clinic.

III Welfare Department. This service is concerned with the welfare of the aged, and with that of various categories of handicapped persons. It is concerned also with the provision of temporary accommodation in certain circumstances for persons in urgent need thereof. The Welfare Officer for the district works from the Health Area Office, Launceston.

Hospital Services. The South Western Regional Hospital Board is the hospital authority for the area.

Launceston Hospital provides in-patient and out-patient facilities in the district. Patients are referred also to hospitals in Plymouth and elsewhere. Cases of infectious disease are admitted to the Scott Isolation Hospital, Plymouth, and tuberculosis patients to Didworthy or Tehidy Sanatoria. Mental hospital accommodation is provided by St. Lawrence's Hospital and Laninval House, Bodmin, and Moorfields Hospital, Ivybridge, Devon.

An Orthopaedic Clinic is held weekly at the Health Clinic, Launceston and a Physiotherapy Clinic at Tavistock Hospital. The Chest Clinic is held at Launceston Hospital. An Ophthalmic Clinic for school and pre-school children is held periodically at the Launceston Health Clinic. A specialist ante-natal clinic is held at the Launceston Health Clinic each week.

Laboratory Facilities. These are provided by the Public Health Laboratories at Plymouth and Exeter to which specimens for bacteriological examination are sent.

SANITARY CIRCUMSTANCES OF THE  
DISTRICT

WATER SUPPLIES

Central Area Water Scheme. Work on this scheme which will cost £47,000 was commenced during the year. The supply of water is obtained from two Bore Holes in the Tregadillett Area and will provide a piped supply to the villages of Tregadillett, South Petherwin and Dawe's House, Langore, Egloskerrey and Badharlick.

SEWERAGE

Coads Green Village. A small scheme for the village of Coads Green was completed at a cost of approximately £1,000. This scheme was financed out of Revenue and serves 27 properties including the School.

Altarnun and Five Lanes. This sewerage scheme, which will cost £20,000, was commenced during the year and, at the time of writing this report, has been handed over to the Council.

PREVENTION OF DAMAGE BY PESTS ACT, 1949

No rodent operator is employed by the Council. There are no known major infestations and where minor infestations are met with, full instructions are issued to the occupiers of property on the method to be used for destroying rats. In recent years a marked reduction in the number of rats has been noted which I attribute to more farmers having taken out contracts with the Ministry of Agriculture, Fisheries & Food for the destruction of rats on their farms, and also to the lack of rabbits. Rabbits used to form the chief item of food for buzzards and stoats and since the virtual disappearance of rabbits in this district rats have, of necessity, taken their place as their chief item of food.

MOVABLE DWELLINGS

The number licensed under the Public Health Act 1936 is 11 and all are maintained in a satisfactory condition and provide homes for people who would otherwise require Council houses.

REFUSE COLLECTION

During the year the Council acquired their own Refuse Disposal Tip at Lawhitton Common. Collection is by Contract and is carried out monthly from all villages and hamlets together with individual houses along the route taken by the Lorry. During the summer months a fortnightly collection is made from the few catering establishments and Trebursey Maternity Home. During the last few years the amount of refuse collected has increased considerably. It is to be hoped that the time is not far distant when the Council will introduce a fortnightly collection service.

HOUSING

Total number of Council Houses	97
Council houses completed 1957	5
Private enterprise houses completed 1957	NIL
Private enterprise houses completed since 1945	46
1. Inspection of dwellings during the year:-	
(a) No. of dwellings inspected for defects under Public Health Acts	51
(b) Inspections for this purpose	99
2. (a) No. of dwellings inspected and recorded under Housing Consolidated Regulations	20
(b) Inspections made for the purpose	38
3. No. of dwellings found to be in a state dangerous or injurious to health as to be unfit for human habitation	11
4. Dwelling houses (exclusive of those under proceeding sub-heading) not in all respects suitably fit for habitation	57
5. Remedy of defects during the year without service of Formal Notices	41
6. Action under Statutory Power during the year:-	
(a) Proceedings under Section 9, 10 & 16 of the Housing Acts, 1936:	
(i) Dwelling houses in respect of which Notices were served requiring repairs	NIL
(b) Proceedings under Public Health Acts:-	
(i) Dwelling houses in respect of which Notices were served requiring defects to be remedied	10
(ii) Dwelling houses rendered fit by owners By Local Authority	10 NIL
7. Proceedings under Secs. 11 & 13 of Housing Act 1936:	
(i) Dwelling houses represented under Sec. 11	10
(ii) Dwelling houses demolished	NIL
(iii) Dwelling houses rendered fit by owner	1
(iv) Dwelling houses where undertaking not to re-let was accepted from Owner	8
(v) Dwelling houses in respect of which Closing Orders were made	2



8. Proceedings under Section 12 of Housing Acts 1936:

- |                                                                                                           |     |
|-----------------------------------------------------------------------------------------------------------|-----|
| (i) Separate tenements or underground rooms in respect of which Closing Orders were made                  | NIL |
| (ii) Number of separate tenements or underground rooms in respect of which Closing Orders were determined | NIL |

9. Proceedings under Section 25 and 26 of the Housing Act 1936:

- |                                                    |     |
|----------------------------------------------------|-----|
| (i) Number of houses dealt with under Sec.25       | NIL |
| (ii) Number of Clearance Orders made under Sec.26  | NIL |
| (iii) Number of families living in Clearance Areas | NIL |

OVERCROWDING

Two cases were met with during the year. One was abated after informal action and the other after Formal action by the Council.

THE RENT ACT 1957

It was anticipated that numerous applications would be made to the Council for Certificates of Disrepair but only one was received. This certificate was granted by the Council and was later withdrawn as the Owner carried out the necessary work.

HOUSING ACT 1949, SECTION 20

Once again, the Council continued its policy of offering an Improvement Grant in every case where the applicant's property reached the required standard and where the Owner was willing to carry out all the necessary improvements. Many informal applications are received but on inspection it is found that the property is unsuitable or where it would be cheaper for the owner to carry out improvements without assistance under the Act.

1. Total number of dwellings improved at 31.12.57	30
2. Complete schemes with tenders submitted during 1957	10
3. Applications approved and grant offered during 1957	10
4. Informal applications received but withdrawn after official inspection	14
5. Schemes completed during 1957	9
6. Total value of Grants offered during 1957	£2,799
7. Total value of all grants offered	£9,367

In all, 39 grants have been offered by the Council in respect of the following types of property:-

1. Grants in respect of Farmhouses Owner-occupied	7 or 17.9%
2. Grants in respect of Farmhouses Tenant occupied	4 or 10.2%
3. Grants in respect of Agricultural Workers' cottages	19 or 48.7%
4. Non-agricultural houses Owner-occupied	4 or 10.2%
5. Non-agricultural houses tenant occupied	5 or 13.0%



Houses directly connected with agriculture have received 77% of the grants offered and 72% of the grants have been made in respect of houses which are tenant occupied. This would appear to be a very fair balance of distribution.

#### MILK

Two supplementary licences for the retail of Pasteurised Milk have been issued by the Council. The remainder of the milk sold in the district is from producer-retailer and the supervision of this supply is carried out by officials of the Ministry of Agriculture, Fisheries and Food.

#### ICE CREAM

There is a modern Ice Cream Factory at Trebursyc where conditions are satisfactory. There are 11 retailers of pre-packed ice cream.

#### FOOD PREMISES

There are in the district:-

Catering establishments	13
Butchers' Shops	10
Grocers' shops	27
Bakeries	NIL

In almost all cases the catering establishments are small and nearly all the grocers shops are small and combined village general stores.

Visits paid to food premises	108
Informal notices served	9
Informal notices complied with	8
Statutory Notices served	NIL

#### KNACKER'S YARD

There is one Knacker's Yard licenced which is well managed and where conditions are satisfactory.

#### MEAT INSPECTION

The position regarding meat inspection is still most unsatisfactory. There are eight private slaughter-houses and applications for Planning approval has been received for two new ones which, if built, will be dealing in the wholesale trade. Three of the slaughter-houses deal in the wholesale trade and between them kill over 28,000 animals a year.

The total killings for the year were 31,050 animals:-

Bullocks	3,583
Calves	4,722
Sheep	20,239
Pigs	2,506

This meat is sufficient for the requirements of a town of 60,000 for twelve months. It is sufficient to supply the needs of 1/5th of the population of the County of Cornwall or 10 times the requirements of your district.

The shortest possible route, taking short cuts through country lanes, for one complete round is 36 miles. As far as the three wholesalers are concerned, 100% could not be obtained with one visit. I estimate that 70 miles a day would be travelled in order to obtain 100% inspection, in driving alone this would take  $2\frac{1}{2}$  hours or more. The weekly hours during which kinning takes place is 74 hours, the recognised days and hours of slaughter being:-

Sunday	6 a.m. - 12 noon
Monday	7 a.m. - 10 p.m.
Tuesday	7 a.m. - 6 p.m.
Wednesday	7 a.m. - 10 p.m.
Thursday	7 a.m. - 5 p.m.
Friday	2 p.m. - 5 p.m.
Saturday	7 a.m. - 8 p.m.

For a single-handed public health inspector with two Rural Districts to serve, the question of meat inspection becomes impossible and, once again, I do not hesitate to put forward my personal opinion that the Government should become responsible for meat inspection and that it should be undertaken by the Ministry of Agriculture, Fisheries and Food.

#### FACTORIES ACT 1937 - 1948

Total number of Factories with Power	15
Total number of Factories without Power	2

#### CLASSIFICATION OF FACTORIES

Agricultural food staff	2
Motor vehicle repairs	4
Engineers and Agricultural Implements	3
General Smithing	1
Concrete Block making	1
Joinery	1
Ice Cream Manufacture	1
Saw Mills	1
Poultry appliances	1
Scrap Merchant	1
Total visits	25
Formal Notice	1
Informal Notices	2

PREVALENCE OF AND CONTROL  
OVER INFECTIOUS AND OTHER  
DISEASES

The infectious diseases which are statutorily notifiable to the Medical Officer of Health are the following:- smallpox, cholera, diphtheria, membranous croup, erysipelas, scarlet fever, typhus fever, typhoid fever, paratyphoid fever, relapsing fever, plague, poliomyelitis, tuberculosis, malaria, dysentery, puerperal pyrexia, ophthalmia neonatorum, acute primary pneumonia, acute influenzal pneumonia, whooping cough, measles, acute encephalitis, meningococcal infection and food poisoning.

The monthly incidence of infectious disease is shown in Table III.

Smallpox. No case was notified during the year in which 56 primary vaccinations and 8 revaccinations were carried out.

Diphtheria. No cases of this disease were notified during 1957. 69 children received a complete course of primary immunisation during the year, the triple antigen against diphtheria whooping cough and tetanus being used in almost all instances.

Poliomyelitis. One case of paralytic poliomyelitis was notified during August. This patient came from the adjoining area of Devon and the diagnosis was made after her admission to a local maternity home. The usual precautions were taken at the home and no further cases occurred.

Vaccination against this disease was resumed in April, when further supplies of vaccine became available. 163 children in the Rural District received a complete course of vaccination against the disease.

Influenza. The Rural District was involved in the influenza epidemic which made its appearance in October. School-children appear to have been first affected, the disease making its appearance among them at the beginning of October and continuing until the end of the following month. As the disease declined among the children, adults appear to have been affected in increasing numbers. The disease seems to have been highly infectious but the attack mild and short-lived. No case of influenzal pneumonia was notified and no deaths occurred from the disease.

Whooping Cough. 25 cases of this disease were notified during the year. As far as can be ascertained from the records, six of these children had been immunised against the disease.

Measles. 24 cases of this infection were notified during the year.

Food Poisoning. No cases of food poisoning were notified during 1957.



Tuberculosis.

	<u>Males</u>		<u>Females</u>	
	<u>Pul.</u>	<u>Non.Pul.</u>	<u>Pul.</u>	<u>Non.Pul.</u>
Cases on Register 31.12.56	11	1	16	1
No. of cases notified during year	-	-	-	1
Cases restored	-	-	-	-
Inward Transfers	-	-	-	-
Cases Removed	2	1	3	-
<hr/>				
Total on Register 31.12.57	9	NIL	13	2
<hr/>				

No action was found to be necessary under the Public Health (Prevention of Tuberculosis) Regulations, 1925, in connection with persons suffering from pulmonary tuberculosis employed in the milk trade, or under Section 172 of the Public Health Act 1936, which deals with the compulsory removal to hospital of persons suffering from tuberculosis.

The Regional Hospital Board is responsible for treatment of Tuberculosis patients and the County Council for the prevention of spread of the disease and aftercare of the patients.

Out-patients and contacts are seen by the Chest Physician (Dr Mellor) at the Chest Clinic at Launceston Hospital. The County Council Tuberculosis Health Visitor attends the Clinic, follows up the patients in their homes, traces contacts and sources of infection and thus acting as a most valuable essential "liaison officer" between the curative and preventive services, bridges a most alarming administrative gap.

All susceptible contacts of known cases are offered B.C.G. Vaccination and most avail themselves of this method of protection.

The scheme for B.C.G. Vaccination of susceptible school-leavers was continued by the County Council during the year again with a good response.

OTHER DISEASES

Cancer of the Lung. It is now accepted that there has been a real increase in the incidence of this form of cancer in recent years. Wide-spread popular interest has been shown in the research which is being carried out into its association with smoking and in particular with cigarette smoking - an association which has been statistically proven.

During 1957, out of a total of 16 deaths from cancer among Rural District residents, one male death was due to cancer of the lung. Since 1949, there have been 47 male and 55 female deaths from cancer. Of these 102, 1. deaths have been due to cancer of the lung. It is not known if these particular deaths had any association with smoking as the medical officer of health has no knowledge of such circumstances nor, indeed, of the actual incidence of the disease. What can be seen is



that the disease does occur in the Rural District and this should provide food for thought.

A circular letter from the Principal School Medical Officer to Head Teachers on this subject, and health education in schools and by other means, appear to have had some result in that a number of school leavers when questioned, have shown themselves to be aware of the association between smoking and cancer of the lung. It remains to be seen whether this awareness will enable them to resist, in later years, the social pressures which induce the habit of smoking. It is certain that they would be considerably helped in this respect by adult, and particularly by parental example.

TABLE ITUBERCULOSIS

Age and Sex Distribution of  
cases and Deaths - 1957

<u>Age Groups</u>	<u>New Cases</u>				<u>Deaths</u>			
	<u>Pul.</u>		<u>Other</u>		<u>Pul.</u>		<u>Other</u>	
	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>	<u>M</u>	<u>F</u>
0 -	-	-	-	-	-	-	-	-
1 -	-	-	-	-	-	-	-	-
2 -	-	-	-	-	-	-	-	-
15 -	-	-	-	-	-	-	-	-
20 -	-	-	-	-	-	-	-	-
25 -	-	-	-	-	-	-	-	-
35 -	-	-	-	1	-	-	-	-
45 -	-	-	-	-	-	-	-	-
55 -	-	-	-	-	-	-	-	-
65 and over	-	-	-	-	-	-	-	-
Age unknown	-	-	-	-	-	-	-	-

TABLE IIVITAL STATISTICS

<u>YEAR</u>	<u>POPULATION</u> (Estimated)	<u>BIRTHS</u>		<u>DEATHS</u>			
		<u>Number</u>	<u>Crude Rate</u>	<u>Under 1 year</u>		<u>All Ages</u>	
				<u>Number</u>	<u>Rate</u>	<u>No.</u>	<u>Rate</u>
1953	6,493	85	13.10	2	23.51	76	11.70
1954	6,480	113	17.43	2	17.7	54	8.33
1955	6,450	87	13.49	1	11.5	79	12.24
1956	6,440	95	14.75	1	10.52	69	10.71
1957	6,420	91	14.17	1	10.99	66	10.28

TABLE III

Monthly Incidence of Notifiable  
Diseases (other than Tuberculosis)

	<u>Jan.</u>	<u>Feb.</u>	<u>Mar.</u>	<u>Apr.</u>	<u>May</u>	<u>June</u>	<u>July</u>	<u>Aug.</u>	<u>Sept.</u>	<u>Oct.</u>	<u>Nov.</u>	<u>Dec.</u>	<u>TOTAL</u>
Whooping Cough	4	6	4	1	1	5	2	-	2	-	-	-	25
Measles	1	-	-	-	-	1	5	14	2	1	-	-	24
Poliomyelitis (paralytic)	-	-	-	-	-	-	-	1	-	-	-	-	1
Erysipelas	1	-	-	-	-	-	-	-	-	-	-	-	1
Scarlet Fever	-	-	-	1	-	-	-	-	-	-	-	-	1
	6	6	4	2	1	6	7	15	4	1	-	-	52

TABIE IV

Carcases & Offal Inspected and Condemned in whole or part

	Cattle excluding Cows	Cows	Calves	Sheep & Lambs	Pigs	Horses
No.killed (if known)		3533	4722	20239	2506	NIL
No.inspected		ACTUAL FIGURES	NOT KNOWN	BUT ESTIMATE	5% ONLY	
<u>All Diseases except tuber- culosis &amp; cysticercosis</u>						
Whole carcases condemned	-	1	-	4	-	-
Carcases in which some part or organ was condemned.	-	5	-	2	-	-
%age of the number inspected affected with disease other than tuberculosis or cysti- cercosis		NO ACCURATE FIGURES				
<u>Tuberculosis only</u>						
Whole carcases condemned	-	2	-	-	1	-
Carcases in which some part or organ was condemned	2	6	-	-	5	-
%age of No.inspected affected with tuber- culosis		NO ACCURATE FIGURES				
<u>Cysticercosis</u>						
Carcases in which some part or organ was condemned	-	-	-	-	-	-
Carcases submitted to treatment by refrigera- tion	-	-	-	-	-	-
Generalised & totally condemned	NIL	NIL	NIL	NIL	NIL	NIL

